

Dayton Parks & Recreation BASKETBALL SIGN-UPS

Registration Forms are at the
Town Hall starting November 7, 2016

4th thru 6th Grade Girls Basketball

4th thru 6th Grade Girls Basketball begins Monday, December 5th. This program will run on Monday and Wednesday from 6-7:30pm and on Saturdays 11:30-1:00pm. Games will begin after Jan 1st. Games will be on Saturdays as well as throughout the week.

4th thru 6th Grade Boys Basketball

4th thru 6th Grade Boys Basketball begins Tuesday, December 6th. This program will run Tuesday and Thursday from 6-7:30pm and on Saturday from 12:30-2pm. Games will begin after Jan 1st. Games will be on Saturdays as well as throughout the week.



K-1 Basketball

K-1 Basketball is an instructional program. This is a 7-week program that is on Saturday's morning from 8:30-9:15am beginning Jan 7th-Feb 18th. Some of the skills they will be working on shooting, dribbling and passing.

2nd and 3rd Grade Basketball

2nd and 3rd Grade Basketball will run on Saturdays 9:30-10:30am beginning Jan 7th-Feb 18th. This program is designed for instructions for the first 4 weeks and then games for the final 3 weeks.

\$40/1st child

\$30/each additional child

Questions? parks.rec@dayton-me.gov

All registration form must be returned to Town Hall

Dayton Recreation Committee
33 Clarks Mills Road
Dayton, Maine 04005

PERMISSION SLIP FOR PARTICIPATION IN PROGRAMS

I give permission for _____ (name of participant) to participate in the Dayton Recreation Committee programs. I do further release, and indemnify the Town of Dayton, Dayton Recreation Committee, the organizers, the supervisors, and any and all of them. In case of injury to my child, I do hereby waive all claims against the Town of Dayton, the Dayton Recreation Committee, the organizers, the supervisor, and any of the supervisor's appointee.

Parent of Guardian (please print): _____

Date: _____

Signature of Parent: _____

Mailing Address: _____ Home Phone: _____

E-mail Address: _____ Work Phone: _____

Alternate Contact: _____ Relationship: _____

Phone Number of Alternate Contact: _____

PARTICIPANT INFORMATION

Name of Participant: _____ M _____ F _____

Date of Birth: _____ Age: _____ Grade: _____

Medical Conditions: _____

Youth T-shirt size (please check one) S (6-8) _____ M (10-12) _____ L (14-16) _____

PERMISSION FOR PHOTOGRAPH

Occasionally, photographers take photos of program participants for publication and/or our website. Please check below your preference for the above named participant regarding photos.

____ YES, I give permission for the participant ____ NO, I don't give permission for the participant

VOLUNTEERS NEEDED

____ YES, I am interested in coaching for this program. PLEASE FILL OUT VOLUNTEER FORM.

PROGRAM INFORMATION

Name of Program: _____

Day: _____ Session: _____

Time of Program: _____ Program Fee: _____ Total \$

INDIVIDUALS PARTICIPATING IN A SCHEDULED EVENT THAT INCLUDES TRANSPORTATION THAT NEED SPECIAL ACCOMODATIONS, PLEASE NOTIFY THE RECREATION DEPARTMENT AT LEAST ONE WEEK PRIOR TO THE EVENT SO WE CAN ATTEMPT TO MAKE APPROPRIATE ARRANGEMENTS. FINANCIAL ASSISTANCE MAY BE AVAILABLE ON A NEED BASIS. CONTACT THE RECREATION COMMITTEE FOR ADDITIONAL INFORMATION.

Below is for office use only

Date: _____ Amount Paid: _____ Rec'd By: _____ Check No.: _____ Method
of Pmt.: _____